MUSC Health
Medical University of South Carolina

Telehealth Outreach PROGRAM

Creating a Telehealth Program for Youth Affected by Trauma:

A Telehealth Toolkit

TelehealthForTrauma.com

PURPOSE

This guide is designed for clinicians, agency administrators, and supervisors working with youth impacted by trauma. Whether you're brand new to telehealth or looking to deepen what you're already doing, this resource is here to help you feel confident, creative, and connected.

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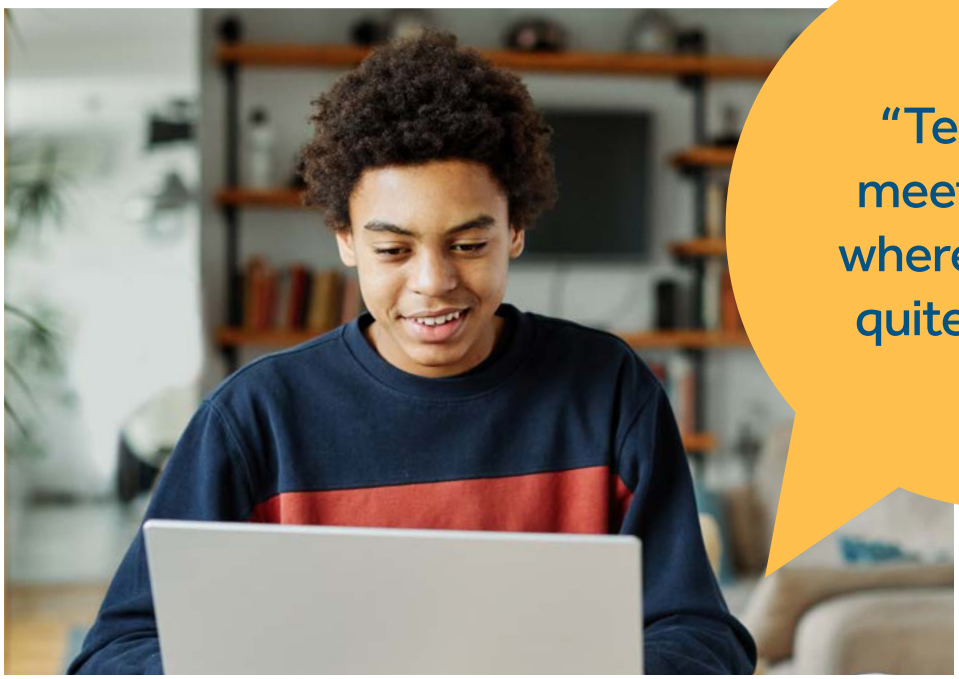
Introduction

For many families who have experienced a traumatic event, evidence-based mental health services may be their hope for healing. Unfortunately, especially in rural and medically underserved populations, there can be many obstacles to accessing these services. This sometimes feels like a mountain to overcome; one that is insurmountable to many.

In the mental health field, we often say "meet people where they are"; telehealth allows us to do exactly that, sometimes quite literally. For clinicians working with youth, especially those from medically underserved or high stress environments, telehealth can open new doors: ones that lead to services for those who may not be able to receive services otherwise.

Telehealth isn't just a backup plan anymore; it's reshaping the future of mental health care. Telehealth has expanded access, increased flexibility, and helped clinicians reach families who were previously unable to access services for a variety of reasons. Now, the question isn't if we should use telehealth, it's how do we do it well.

This guide provides a step-by-step approach to creating a telemental health program that is engaging, interactive, and effective. It is designed for clinicians, agency administrators, and program leaders working with youth impacted by trauma. Whether you're brand new to telehealth or looking to deepen what you're already doing, this resource is here to help you feel confident, creative, and connected.



"Telehealth meets people where they are, quite literally."

Acknowledgments

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About the MUSC Telehealth Outreach Program

The Telehealth Outreach Program (TOP) is a collaborative effort to increase access to evidence-based trauma-focused mental health treatments for children and adolescents through telehealth technology.

TOP provides training and ongoing consultation needed to build the knowledge and skills necessary to deliver Trauma Focused Cognitive Behavioral Therapy and other trauma-focused EBTs via telehealth. The program is dedicated to improving access to trauma focused treatment, especially for those in rural and medically underserved areas. Services are provided through school-based and home-based telehealth.

Telehealth Outreach
PROGRAM

"Telehealth is not about replacing in-person care. It is about expanding what is possible."

Why Telehealth Matters

With the rise of mental health needs among youth affected by trauma, traditional therapy often falls short due to barriers such as distance, cost, and clinician shortages.

As of December 2023, more than half of the U.S. population, 169 million people, live in a mental health professional shortage area (HRSA, 2023), and only about half of those experiencing mental health concerns receive the services they need (SAMHSA, 2023). Telehealth offers an essential pathway to care for medically underserved youth, demonstrating strong effectiveness when supported by appropriate training and tools.

Research has shown:

- **High completion rates of Trauma Focused Cognitive Behavioral Therapy** (Stewart et al., 2017; Stewart et al., 2020; Orengo et al., 2022)
- **Large symptom reduction in PTSD** (Stewart et al., 2017 & 2020)
- **High client satisfaction with technology and meaningful sessions** (Villalobos et al., 2023; Goslin & Epstein, 2024)
- **Therapeutic alliance was maintained, even with youth** (Villalobos et al., 2023)
- **Outcomes were on par with in-person services** (Hagi et al., 2023)
- **Barriers like travel, childcare, and stigma were significantly reduced** (Villalobos et al., 2023)

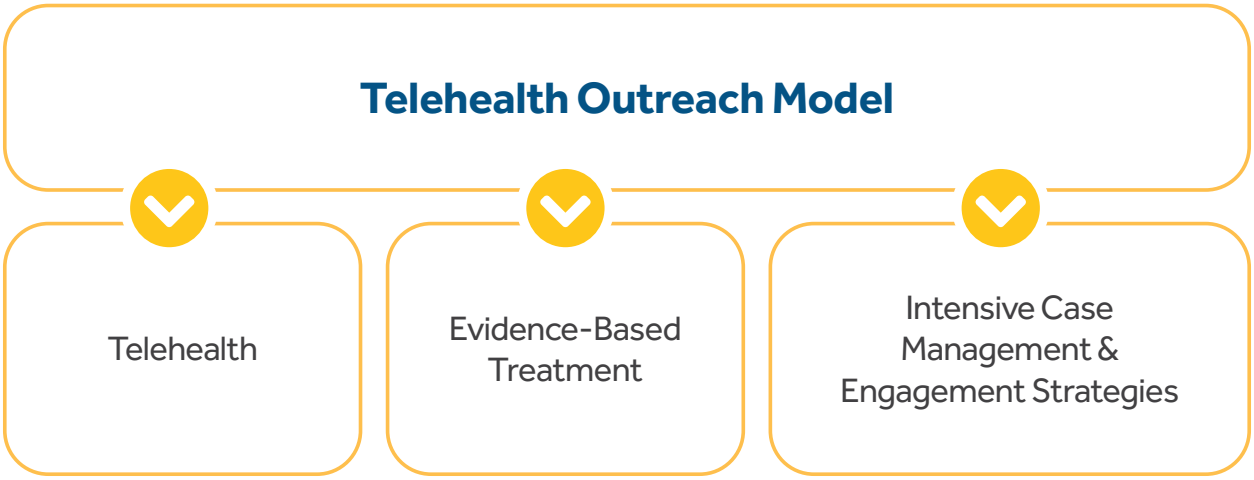
When used with care and intention, virtual therapy sessions become more than just convenient, they become lifelines for families who've been stuck on waitlists, driving hours to find help, or simply surviving with no services nearby.

Developing a Telehealth Program

A well-defined mission is the first step in developing an effective telehealth program. The aim should be to enhance access to high quality mental health services for traumatized youth, regardless of geographical or financial barriers.

Using frameworks like the Telehealth Outreach Model, (Stewart, et al, 2024), which incorporates engagement and case management alongside evidence-based treatments, have been successful in enhancing access to mental health services, particularly for rural and other medically underserved populations.

To create a robust telehealth model, consider adopting established frameworks, such as the Telehealth Outreach Model that was developed specifically for using evidence-based therapy over telehealth. The model combines trauma focused telehealth therapy with proactive engagement strategies and case management support. This model ensures that clients receive consistent support beyond therapy alone, addressing potential barriers and assisting families with various needs.



Developing an initial and ongoing budget is another foundational step. Initial funding should account for expenses like training, IT setup, videoconferencing platforms, therapeutic engagement supplies, and equipment for families lacking technology access. Ongoing costs may cover platform subscriptions, IT support, and periodic equipment updates. Setting clear financial plans is essential for both initial rollout and sustainable growth (Herting, Condol, & Stewart, 2023).

Policies, Procedures and Forms

Setting up clear telehealth policies isn't just about compliance, it's about creating a foundation for safe, ethical, and effective care.

Well-developed policies and forms support clinicians and administrators alike by outlining expectations, protecting client rights, and reducing risk. While many general clinical policies carry over into virtual care, telehealth introduces new factors that require dedicated planning.

Core policy areas to consider:

- **Informed Consent for Telehealth:** Families must understand what telehealth is, how it works, and what its limitations are. This includes discussing confidentiality, risks, benefits, and how emergencies will be handled remotely.
- **Privacy & Security:** Outline how client information is protected on the telehealth platform, including use of HIPAA-compliant tools, data storage, and protocols for device sharing.
- **Email Policy:** Establishes boundaries, protects confidentiality, and ensures ethical, legal practice. It should set clear response times so clients know clinicians aren't available 24/7. It should state that email may be used for scheduling or brief updates, not therapeutic discussions. It must never be used for emergencies; crisis resources will be provided. This should be stated in policy, as well as a form that clients sign.
- **Emergency Protocols:** Virtual therapy requires clear plans for what happens if a client is in crisis or disconnected mid session. Include steps for verifying the client 's location and emergency contacts at the start of treatment.
- **Technology Access & Use:** Policies should guide both clinicians and clients in using technology safely and responsibly.

All documents should be reviewed to ensure they align with licensure board standards, HIPAA regulations, and agency accreditation needs.

Tip

Make sure your policies are readable and family friendly, not just legalistic. All families should be able to understand them easily.

IT and Equipment Needs

Telehealth Platform

Platforms must be compliant with the Health Insurance Portability and Accountability Act (HIPAA) to protect sensitive health information and have secure communication features. Platforms that offer interactive tools such as chat, screen sharing, annotation, and breakout rooms are preferred, as these features can enhance engagement and participation in therapy.

Clinician Equipment

Hardware setup should provide clinicians with reliable laptops or desktops, ideally equipped with high-definition webcams, high quality headsets, and dual monitors or larger single monitor, which improve both visual contact and multitasking capabilities during sessions.

Client Equipment

Clients also need a reliable laptop, desktop or tablet. Phones are not recommended for telehealth sessions with children, as the screens are too small to show the interactive techniques utilized in telehealth. It is also recommended that clients have headphones for confidentiality.

Equipment Loaner Programs

For clients without access to adequate devices or internet, establishing an equipment loaner program can bridge the digital divide. Such programs can provide tablets with data plans, noise canceling headphones, sound machines, and protective cases to ensure that all clients can engage meaningfully in telehealth sessions, regardless of their location or financial situation.

IT Support

Regular technical support from IT ensures program functionality, with IT consultants available for troubleshooting and routine updates.

Emergency Procedures

When working with youth via telehealth, clinicians face a unique challenge: supporting a disproportionately affected population without being physically present. While remote care opens doors to access and continuity, it also limits how quickly and directly we can respond in crisis situations. This makes emergency planning essential.

Emergencies during telehealth sessions may not be common, but when they do happen, the stakes are high, and the clock is ticking. Having a clear, pre-established emergency plan can prevent panic and ensure the safety of the child, family, and clinician. Rather than scrambling to figure out what to do in the heat of the moment, providers and caregivers should know exactly what steps to take.

Why Emergency Protocols Matter

Unlike in office therapy, telehealth clinicians don't have control over the client's physical environment or immediate access to emergency resources. You can't physically escort a child to safety, monitor their surroundings, or step into the hallway to consult a colleague. That's why a prepared caregiver becomes your eyes, ears, and first responder during a crisis.

At a minimum, a responsible adult should be present in the home during every telehealth session with a child or adolescent. This person plays a critical role in responding quickly if something goes wrong and should be fully looped into the emergency protocol.

Emergency Planning Checklist

Below is a step-by-step emergency protocol used in our training programs. Consider adapting this checklist for your agency's procedures:

1. Complete the emergency protocol at the first visit. Begin by reviewing and documenting the emergency plan. This includes gathering location information, emergency contacts, and clear procedures.
2. Verify an adult caregiver is present in the home each session. You should confirm that a responsible adult is physically on-site before beginning every session. If no caregiver is available, the session should be rescheduled.
3. Have the caregiver's contact number on file and accessible. Confirm the number every session so that you can reach them immediately if needed.
4. Record the child's exact location within the home. It's not enough to know the address—be sure you know where in the house the child is during the session (e.g., bedroom upstairs, basement, etc.). This is particularly helpful if emergency services need to be called to the home.
5. If an emergency arises, instruct the caregiver to enter the room. If a crisis unfolds, the first step is to direct the caregiver to enter the room and offer in-person support. If the situation cannot be stabilized, instruct them to call 911.
6. If the client cannot reach safety or deescalate, call 911. You may need to call emergency services yourself, especially if the caregiver is unavailable or the client is at immediate risk.
7. Know local emergency resources. This includes mobile crisis units, behavioral health response teams, or the nearest emergency department. Having this information prepared ahead of time for each client is key.

Emergency contacts should be confirmed at intake and re-confirmed periodically. Phone numbers change and caregiving responsibilities can shift, so regularly verifying this information ensures that crisis protocols remain accurate and effective.

Tip

Make sure clients are not using their caregivers' cell phone for sessions. This limits your ability to contact caregivers in the event of an emergency.

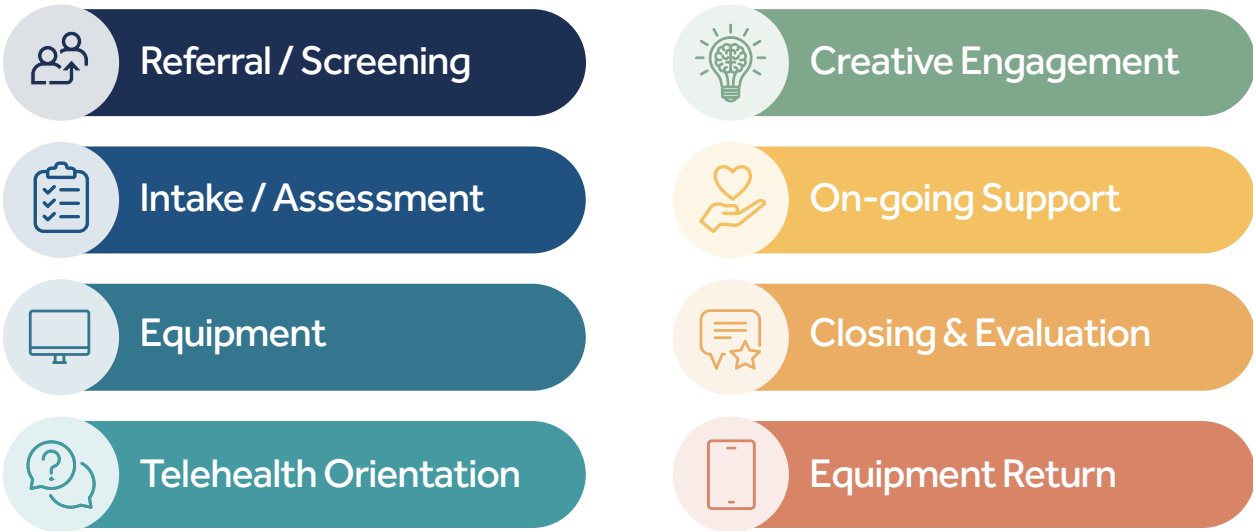
Telehealth Workflow

A defined telehealth workflow is essential for ensuring that services are delivered consistently, efficiently, and with the highest quality of care.

Without a clear process, important steps such as screening for barriers, orienting clients to technology, or following up after services end can be missed, leading to frustration for both clients and staff. A well-documented workflow also clarifies who is responsible for each step, making it easier for teams to work together smoothly. In many cases, clinicians do not need to carry out all tasks themselves. Through task sharing, case managers, advocates, or other support staff can take on key responsibilities such as initial screenings, ongoing engagement, equipment management, and post service follow-up. This approach not only reduces the workload for clinicians but also allows each team member to work at the top of their scope, increasing overall efficiency and improving client experience.

The following is a description of a suggested telehealth workflow. You can adapt this workflow to fit the needs of your organization. The process begins with referral and screening to identify needs and potential barriers, then moves to intake and assessment for collecting essential clinical and logistical information. Clients are provided a telehealth orientation to set expectations, review privacy needs, and test technology.

Equipment needs are addressed early, with loaner devices provided when available. Throughout treatment, engagement is supported through interactive tools like games, telehealth resource boxes, and annotated worksheets. Ongoing support such as appointment reminders, troubleshooting, and referrals helps maintain connection, while the closing phase ensures a smooth wrap up, gathers feedback, and coordinates equipment return.



Telehealth Workflow

1. Referral/Screening
- Referral process
- Mental health screen
- Barriers screen

2. Intake/Assessment
- Consent & paperwork
- Clinical interview
- Clinical assessments
- Telehealth expectations
  - Caregiver must be home for all sessions
  - Emergency protocol

3. Equipment
- Assess for equipment needs
- Family usingw loaner equipment (if available)
  - Sign loaner agreement
  - Give equipment & instructions

4. Telehealth Orientation
- Test connection
- Review netiquette
- Tele tour
- Need for privacy
- Set boundaries

5. Creative Engagement
- Teleboxes/supplies
- Games Videos/electronic books
- Therapy handouts and workbooks
- Annotate

6. On-going Support
- Appointment reminders
- Troubleshooting when issues
- Referral to community resources
- Coordination with other service providers

7. Closing and Evaluation
- Clinical assessments
- Satisfaction survey
- Graduation celebration
- Follow-up plan

8. Equipment Return (when available)
- Prepaid postage envelope
- Return letter
- Follow-up if needed
- Equipment check in
- Equipment cleaning

Engaging and Training Staff

Launching or expanding a telehealth program is not just about getting the right technology—it's about preparing and engaging the people who will use it. Clinicians who offer telehealth services should have training in both the clinical and technical aspects of virtual care. This includes learning how to use video conferencing platforms, understanding ethical and legal considerations specific to telehealth, and adapting their clinical skills to a virtual setting.

Initial and Ongoing Training

Adapting evidence-based treatments for virtual delivery.

Clinicians need to know how to conduct clinical assessments and deliver interventions effectively through virtual platforms. This includes covering telehealth specific privacy and emergency protocols, learning to identify and manage potential risks such as client safety concerns or technical failures, and understanding how to maintain client confidentiality in compliance with HIPAA regulations in a digital environment.

Ethical and legal considerations.

Clinicians must understand the legal and ethical implications of providing telehealth across state lines and be aware of relevant regulations. Clinicians should learn about practice-specific licensure and related requirements in the state where they are located and should be licensed or legally permitted to practice in the state where clients are located. Recommended resources include telehealth.hhs.gov/licensure; licensureproject.org; psypact.gov; imlcc.com. Additionally, training should cover the process of obtaining informed consent for telehealth services, including how to explain the risks and benefits of virtual care. It should also include instructions on maintaining accurate, secure records of telehealth sessions.

Navigating the telehealth platform and tools.

Clinicians should be comfortable using secure, user friendly videoconferencing platforms and troubleshooting common technical issues. They need to be proficient with platform features such as chat, screen sharing, video and audio sharing, introducing a whiteboard, and annotating—and be able to teach these functions to clients. Troubleshooting skills should include resolving problems like a non working microphone or difficulties connecting.

Using creative engagement strategies.

Clinicians should develop skills for engaging children and families virtually, including effective communication techniques such as active listening and interpreting nonverbal cues. Training should also include creative approaches—games, art activities, co-regulation exercises—that make telehealth sessions interactive and relationship focused.

Addressing personal biases or hesitations toward telehealth.

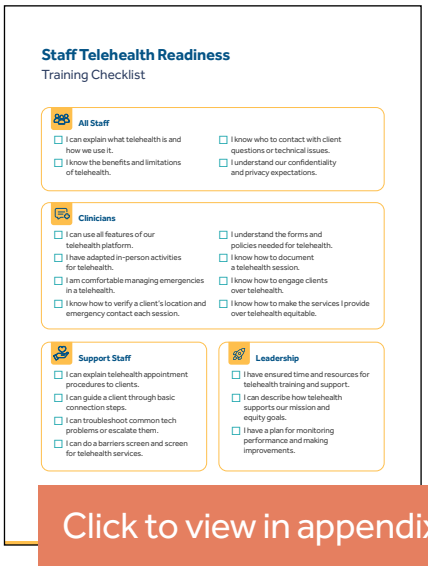
Some clinicians may believe that counseling should only occur in-person. Acknowledging these concerns, sharing research on telehealth effectiveness, and highlighting success stories from similar organizations can help shift perspectives. Creating a safe space for dialogue, and emphasizing that telehealth is not about replacing in-person care but expanding access, is key to building buy in.

While clinician training is critical, program success and sustainability also depend on preparing every staff member. From clinicians to receptionists to administrators, everyone plays a role in how clients experience telehealth. The more prepared and confident your team is, the stronger your telehealth program will be.

Tip

Training on providing evidence-based treatment via telehealth can be found at **TelehealthForTrauma.com**

Training should be agency wide and include partner agencies and ancillary staff. Clinicians may be the primary service providers, but they are not the only ones who will interact with clients about telehealth. Receptionists often answer calls from families with questions or technical issues. Social workers may refer clients, and administrators are responsible for ensuring that clinicians have the resources and time needed to adapt to telehealth. A united, well trained team ensures that clients receive consistent, accurate information and feel confident about the services provided.



Click to view in appendix →

Administrative and ancillary staff also require some telehealth knowledge. They must be able to explain what telehealth is, schedule appointments, help clients log in, and troubleshoot basic technical problems. They should also know when to escalate an issue to a clinician or IT support. Leadership plays a vital role in creating a culture that supports telehealth adoption. Leaders need to understand the time and support clinicians require during implementation, ensure the program is adequately resourced, and act as visible champions for telehealth within the organization and the community.

Training and engagement should not be one time events. Ongoing support is essential; through refresher sessions, quick reference guides, and advanced training for clinicians.

Advanced training could include topics such as:

- Navigating Telehealth Emergencies
- Working with Challenging Clinical Symptoms via Telehealth
- Providing Groups Via Telehealth
- Managing Safety Concerns Over Telehealth

> "Telehealth doesn't just bring therapy into homes, it brings hope within reach."

Leadership should monitor staff confidence and competence over time, adapting training as technology and client needs evolve. Celebrating small wins, such as positive client feedback or reduced no show rates, can keep momentum strong and reinforce the value of telehealth services.

Clinician Well-Being in Telehealth

Providing trauma treatment is meaningful and rewarding work, but it is also demanding. When services are delivered through telehealth, the challenges shift in unique ways.

Clinicians may spend long hours behind a desk with little movement, fewer natural breaks, and limited face-to-face connection with colleagues. For those working from home, the lines between personal and professional life can blur, and trauma work may feel like it is entering their living space. Without intentional self-care and boundaries, this combination can increase fatigue, compassion stress, and burnout. Protecting clinician well-being is therefore essential—not only for the clinician's health, but also for sustaining effective, ethical care for clients.

Practical Strategies for Well-Being

1. **Use low-impact debriefing.** Trauma work can be heavy. Avoid sliming others (sharing vivid details that transfer the emotional weight). Instead, debrief using consent-based, limited disclosure that focuses on your reactions rather than retelling the trauma itself. This protects both you and your colleagues.

2. **Engage in supervision and consultation.** Regular supervision and peer consultation provide a safe space to process difficult cases, gain perspective, and share strategies. Prioritize these supports just as much in telehealth as you would in-person.

3. **Build support at work and at home.** Identify people who can keep you accountable to your wellness practices and notice when you're showing signs of fatigue. This might include colleagues, friends, or family who understand the demands of trauma work.

4. **Ergonomics Matter.** Telehealth often means spending long hours at a screen. A supportive chair, proper desk height, good lighting, and regular screen breaks can reduce fatigue, eye strain, and physical discomfort, allowing clinicians to stay present and focused during sessions.

5. **Plan extra time.** Telehealth requires additional preparation. This includes creating resources, adapting activities, and troubleshooting technology. Building in extra time reduces stress and prevents sessions from feeling rushed.

6. **Space out appointments.** Leave room between sessions for stretching, movement, and bio breaks. Short breaks also allow you to reset emotionally before engaging with the next client.

7. **Get up and move.** Sitting at a desk for hours can increase fatigue, tension, and even emotional heaviness. Taking time to stand, stretch, or walk between sessions boosts energy, improves focus, and supports emotional regulation. Even a few minutes of movement can reset your body and mind, making it easier to stay present and engaged with clients.

8. **Set boundaries.** Establish clear limits between work and personal life. If working from home, consider having a designated space for sessions and routines to close the workday (e.g., shutting down your computer, or going for a walk).

9. **Reset before, during, and after sessions.** Create rituals that act as protective buffers. Deep breathing before starting, stretching between sessions, or journaling after the day ends. These small resets can help keep trauma content from lingering.

10. **Continue learning.** Engaging in ongoing training builds confidence and competence, which enhances resilience. Feeling effective in your work makes it easier to sustain over time.

11. **Allow transition time.** Give yourself time to decompress before shifting from professional to personal roles. Even a brief pause helps signal to your brain and body that work is complete.

12. **Remember the rewards of your work.** Intentionally reflect on the positive such as success stories, small breakthroughs, or moments of connection. Sharing these with colleagues or writing them down can help balance the weight of trauma with the hope of healing.

Clinician well-being is not optional, it is the foundation of effective trauma treatment. Telehealth adds new layers of challenge, but with intentional boundaries, support systems, and resilience practices, clinicians can not only sustain themselves but also continue to find joy and meaning in their work.

Engaging Families

Engagement is the heartbeat of therapy, and in telehealth, it takes even more intentionality. Without this effort, sessions risk becoming ineffective, overly focused on talking, and less interaction for clients.

Engagement should be focused on clients and caregivers. Caregivers are not just supporters of telehealth, they are essential partners. Their involvement helps children stay engaged, provides structure during sessions, and ensures that skills learned in therapy are reinforced at home. When caregivers feel confident with the technology and supported in their role, the likelihood of consistent attendance and meaningful progress greatly increases. For many caregivers, getting started also means overcoming skepticism. They may wonder if their child will pay attention on a screen, or if a clinician can truly connect without being in the same room. Youth may worry that therapy will feel boring or too much like school. These concerns are normal, and they're important to acknowledge up front.

At the same time, telehealth creates new opportunities for engagement. It allows families to join sessions from their own homes, often making them more comfortable. It invites clinicians to be creative and flexible, using games, visuals, movement, and even items from the family's own environment to make sessions more meaningful. Telehealth is about building strong, trusting relationships with both in a way that sustains therapy and makes progress possible.

Research shows that with intentional strategies, engagement in telehealth can be just as effective as in-person care. In fact, studies have found that families often report high satisfaction, strong follow-through, and even reduced no-show rates when therapy is delivered virtually (Stewart et al., 2020; Comer et al., 2017). These findings reinforce that when clinicians approach telehealth with creativity and intention, strong therapeutic relationships and meaningful outcomes are absolutely possible.

Helping Families Overcome Barriers

Before services begin, it's important to identify potential obstacles that could affect attendance, participation, or follow-through. A barriers screening tool—a short questionnaire or conversation, can help uncover logistical, emotional, and environmental challenges families may face. This might include asking about internet access, device availability, comfort with technology, time constraints, privacy concerns, or caregiver mental health needs. By assessing barriers up front, clinicians and agencies can proactively create solutions rather than reacting after problems arise. Once potential barriers are identified, they can be addressed with targeted strategies:

1. **Offer digital literacy support.** Not all families are equally comfortable with technology. It can be helpful to provide a telehealth orientation session before the first session where clients can practice logging in, test their camera and microphone, and learn how to use key platform features. Provide step-by step guides with screenshots or short video tutorials they can reference later.

2. **Address privacy concerns.** Help families problem solve ways to create a private therapy space; using headphones, finding a private location in the home with a door that closes, or setting up in a quiet corner of the home. Help caregivers brainstorm ideas to managing possible disruptions by other family members. Normalize that privacy looks different for every family and that solutions can be creative.

Discuss with caregiver the need for a private space

This means a room with a door that closes.

Explain the importance of privacy

Discuss that this is therapy, just like if they came to the office. Information is confidential and should be out of the eyes and ears of others.

Problem solve typical challenges

Help families problem solve issues such as other children in the home, noise, confidentiality and distractions.

Discuss therapy expectations

- Be prepared
- Everyone needs to be dressed
- Other devices need to be off and put away including phones, radio, tv, computer and gaming
- No laying in bed/couch
- Have equipment on a stable surface
- No driving during session
- No smoking, drinking, or drug use during session
- An adult must be in the home
- Caregivers must participate in therapy

3. **Assist with equipment and supplies.** Help families without access to adequate devices and/or internet to obtain needed equipment through a loaner program or by partnering with community supports such as a local library, school or community agency.

4. **Provide on-going support.** Ongoing support helps keep families engaged and therapy consistent. This includes sending appointment reminders, offering quick tech troubleshooting, connecting families to community resources, and coordinating with other providers so care is consistent across settings.

5. **Be flexible with scheduling.** For families balancing multiple jobs, school schedules, or caregiving responsibilities, rigid appointment times may be difficult. When possible, offer sessions outside standard business hours or adjust appointment length to meet their needs.

6. **Provide services at school or community partner organization.** School/partner based telehealth can help overcome issues of transportation, caregiver availability, internet issues, and consistency. Work with your school or other agencies to identify telehealth champions that can help you set up services, find private spaces, and assist with arranging appointments.

7. **Connect families to their communities.** While a telehealth clinician can't help a family overcome every barrier, they can play a vital role in linking families to community supports. Many communities offer resources such as food banks, shelters, clothing closets, and housing programs. Families may also benefit from assistance applying for programs like TANF, SNAP, Medicaid, or childcare,. Other supports might include addiction and domestic violence services, free or reduced-cost medical and dental care, parenting classes, and even school supplies. By connecting families to these resources, clinicians help reduce stressors that often interfere with treatment and strengthen the family's overall support system.

"When barriers fall, possibilities rise. Telehealth opens doors where none existed before."

Making Telehealth Creative and Fun

Its not uncommon that when clinicians move from in-person sessions to telehealth, sessions change from being more interactive and engaging, and lean towards static, talk-heavy telehealth sessions.

This can lead to lower engagement from children, caregivers, and even clinicians themselves. Telehealth doesn't have to be that way—when approached with creativity, telehealth can be just as dynamic as in-person care.

Use the tools at your fingertips

Take advantage of your telehealth platform's features:

- Screen sharing to show worksheets, videos, or slides
- Virtual whiteboards for drawing, diagramming, or playing games
- Annotation tools to circle, highlight, or add playful elements
- Polls or quizzes to check understanding or make sessions interactive

Bring in hands-on activities

Encourage children to use art supplies, build with blocks, or create mood trackers at home. Incorporate scavenger hunts (Find something in your house that makes you feel calm) or show-and-tell moments.

Keep movement in the mix

Short movement breaks can help reset energy. These can be guided stretches, dancing to a favorite song, or simple breathing exercises.

Gamify skill-building

Turn therapy goals into challenges. For example, reward completing a coping skill practice with virtual badges or track progress visually on a shared screen.

Engage the senses

Incorporate music, calming visuals, or tactile tools like fidgets to help regulate emotions during sessions. Ask youth what sensory items they find helpful and integrate them into the plan.

Creativity and play keep children engaged, but lasting progress depends on more than fun activities. Strong therapeutic relationships remain at the heart of trauma treatment—whether online or in-person.

Keeping the Relationship Strong

While tools and activities are important, the therapeutic relationship remains central. Connection is what makes telehealth feel personal and effective.

- Begin each session with a brief personal check-in or routine that builds rapport.
- Maintain consistency in how you start and end sessions—this creates a sense of safety and predictability.
- Be transparent about the differences between in-person and virtual therapy, and
- Invite collaboration to make telehealth work for the client.
- Celebrate small wins—whether it's a completed homework assignment, improved mood, or a caregiver report of progress.

Telehealth Verification

Youth Checklist

- [x] Is an adult present/name
- [x] Address located
- [x] Location in the home
- [x] Emergency contacts

Practical Takeaways

- Begin with a barriers screening to anticipate and address challenges before they disrupt treatment.
- Focus on solutions, not just the barriers—offer clear steps families can take to overcome obstacles.
- Keep sessions interactive, hands-on, and family-inclusive.
- Use creativity and flexibility to maintain engagement and meet each family's unique needs.

Remember that strong relationships and consistent connection fuel progress. When telehealth is approached with intentionality, creativity, and partnership, it can be a powerful tool for helping families feel supported, engaged, and capable of growth, even when life makes traditional in-person therapy difficult.

Readiness and Sustainability Guide

Launching a telehealth program is about more than choosing a platform and scheduling appointments. To succeed, agencies need to prepare for readiness at the start and plan for long-term sustainability. Readiness means assessing your organization's capacity, staff, technology, policies, and workflows before you begin. Sustainability means building the systems and support needed to keep telehealth strong over time, ensuring it doesn't fizzle out after initial enthusiasm.

Preparing to Launch: Readiness Matters

A strong telehealth program doesn't just go live overnight, it starts with careful preparation. Readiness is about laying the foundation so that staff, technology, policies, and workflows all align before the first session takes place. This not only ensures a successful program but goes a long way in making sure things run smoothly and services are helpful for your first clinical session. Taking time on the front end to assess your organization's needs, clarify roles, and establish systems prevents frustration later and builds confidence among both staff and families. In this section, we'll explore the key steps to ensure your agency is truly ready to launch and sustain telehealth services.

1. **Leadership and vision.** Leaders must clearly understand why telehealth matters for their agency and community. This includes defining goals, gaining staff buy-in, and setting realistic expectations. Leadership support is one of the strongest predictors of success.
2. **Assess organizational needs.** Begin by identifying why you are offering telehealth and who you intend to serve. What barriers do your clients have in your service area? Who is making it to your services and who is not? A simple analysis of your data and service population can clarify your goals and guide decision-making.
3. **Determine your organizations maturity.** Some agencies are just piloting telehealth, while others already have experience and want to expand. Knowing your starting point helps you set realistic goals and track progress.
4. **Policies and procedures.** Every program needs clear procedures: informed consent that includes telehealth, emergency protocols for telehealth, referral and screening processes, and confidentiality protections. A Barriers to Service Questionnaire can also help identify whether telehealth is the right fit for each family.
5. **Define staff roles.** Every staff member, from clinicians, administrators, support staff, and reception, needs to know how they contribute to telehealth. Appointing a telehealth coordinator can help keep systems organized and ensure families receive consistent information.
6. **Prepare staff.** Training should cover technology use, clinical adaptation, ethics, and communication with clients. Staff should feel confident about explaining telehealth to families, helping with common technical issues, and knowing when to escalate problems.
7. **Address legal and regulatory requirements.** Review state and federal guidelines around licensure, reimbursement, cross-state services, and malpractice coverage.
8. **Assess technology and workflow.** Choose a secure, reliable platform that has interactive features such as white board, annotate, and break-out rooms, if possible. Map out workflows for scheduling, documentation, billing, and tech support.
9. **Technology and IT support.** Agencies must ensure adequate equipment, secure platforms, and reliable internet for clinicians. Access to IT support is crucial, as technical failures can interrupt therapy and reduce client trust.

From Readiness to Sustainability

Readiness ensures your telehealth program starts on solid ground, but long-term success depends on more than just a strong launch.

Once the basics are in place, agencies must focus on sustaining telehealth, maintaining financial stability, keeping technology current, supporting staff, and ensuring families continue to feel engaged and supported.

1. **Financial planning.** No program is sustainable without financial stability. Budgeting must account for platform subscriptions, equipment, IT support, staff training, and potential client needs like equipment loaner programs or telehealth "kits." Sustainability also requires ongoing funding sources. Beyond start-up dollars, agencies should pursue reimbursement, grants, and partnerships. Budgeting should also anticipate upgrades, replacements, and staff training over time.

2. **Data and evaluation.** Tracking outcomes builds credibility and keeps funders engaged. Collect data on client demographics, service utilization, how many miles telehealth saved, other barriers it helped overcome, satisfaction, improvement, and program efficiency (such as no-show reductions).

3. **Workforce sustainability.** Staff need more than one-time training. Ongoing refreshers, mentoring, and peer support reduce burnout and keep skills sharp. Identifying a core group of telehealth champions can anchor program success. Setting up a clear and interactive orientation and on-boarding experience for new staff will also help pass on knowledge as your program grows.

4. **On-going supports for families.** Long-term sustainability means reducing barriers for families such as assisting with technology through equipment loaner programs, low-tech solutions when bandwidth is limited, or materials in multiple languages.

5. **Community partnerships.** Building partnerships with schools, healthcare providers, advocacy groups, and payers ensures referral networks stay strong and families experience coordinated care.

6. **Communication and visibility.** Flyers, tip sheets, and clear marketing materials help families understand telehealth, while regular updates to staff and partners reinforce confidence in the program.

Telehealth Challenges

Telehealth opens doors for families who may otherwise struggle to access trauma treatment, but it also presents unique challenges.

Unlike in-person care, clinicians cannot always control the environment, read nonverbal cues as easily, or respond as quickly in crises. Families may face limited privacy, technological frustrations, or uncertainty about how therapy works virtually. On top of that, many clients present with clinically challenging symptoms that make telehealth more difficult. However, with preparation and flexibility, most obstacles can be anticipated and effectively managed.

Deciding When Telehealth is a Good Fit

Telehealth can feel especially complex when working with youth who present with high-risk or clinically challenging symptoms. In an office based setting, a clinician has more control over the environment and can physically intervene, redirect, or de-escalate as needed. Over telehealth, those options are more limited and less accessible. The clinician must rely on caregivers, the client's environment, and technology to manage situations that can escalate quickly. Determining whether telehealth is the right fit for a client is rarely a straightforward decision. In a perfect world, some children and families would be best served in-person, while others might thrive through telehealth. However, in many medically underserved communities, telehealth may be the only option for accessing trauma treatment. In these cases, the responsibility falls on providers to adapt and make telehealth as safe and effective as possible, rather than leaving families without care. Doing nothing is not helpful, and when telehealth truly cannot meet a child's needs, it may be a sign that the child requires a higher level of care than outpatient treatment can provide.

Telehealth should not be seen as an all or nothing approach. With caregiver involvement, creative adaptations, and thoughtful planning, many children who might initially seem unsuited for virtual therapy can still benefit. The goal is to ensure that every child has a pathway to receive trauma-informed care, whether that's through telehealth, in-person services, or a higher level of support.

Tip

The decision tree included in this guide is designed to help clinicians identify barriers, put supports in place, and make informed choices about how to proceed.

Navigating Clinically Challenging Situations

Clients' symptomology and unique needs at times can also make telehealth challenging. Rather than seeing these challenges as barriers, it is helpful to approach them as opportunities for problem solving and collaboration with families. With preparation and creativity, telehealth can still provide safe, effective treatment, even in the following situations:

- **Aggression.** In office, clinicians might redirect physically or separate a child from unsafe items. Over telehealth, these safeguards are not always available. This can make aggressive behavior more difficult to manage remotely. Adaptations include preparing families ahead of time to create safe therapy spaces, removing fragile items, and establishing a clear behavior plan that includes rewards for positive engagement. Using caregiver coaching during sessions can help redirect and support children when escalation occurs.

- **Hyperactivity/ADHD.** Children with ADHD may have difficulty sustaining attention online, especially when sitting in front of a screen. Unlike an in-office setting, the clinician cannot control the environment or easily offer movement breaks. Telehealth sessions can be adapted by shortening the length of meetings, adding structured breaks, using fidgets, and incorporating interactive activities such as scavenger hunts, drawing, or movement games. Involving caregivers in maintaining structure can also help keep the child engaged and successful.

- **Self-Harm or Suicidal Thoughts.** In-person therapy allows for immediate intervention if a client engages in unsafe behavior. Over telehealth, this direct response is not possible, which makes safety planning essential. Clinicians should establish clear protocols at the start of treatment, confirm caregiver presence, and ensure unsafe items (such as sharps) are removed. Emergency contacts and local crisis services should always be on hand, and clinicians must check in each session to reassess safety. These adaptations ensure that even in a remote setting, risk can be managed proactively.

- **Problematic Sexual Behaviors.** In a therapy office, close observation helps ensure sessions stay safe and appropriate. Over telehealth, clinicians rely on camera placement and caregiver supervision. To adapt, cameras should be positioned to capture the child's full body, parental controls may be applied to devices, and caregivers should remain accessible to provide support if concerning behaviors arise.

- **Youth with Special Physical Needs (e.g., hearing or vision impairments).** Telehealth introduces extra barriers when communication tools are needed. While in-person therapy may allow for tactile resources or specialized equipment, telehealth requires creative accommodations. However, many youth and families may have already addressed some of these barriers through technology and special services through schools and community agencies. Clinicians can partner with schools and specialized services to borrow adaptive technology, use interpreters, captioning apps, or adjust visuals and sound to meet each child's needs.

- **Youth with Limited English Proficiency.** To best serve youth and families with Limited English Proficiency it can be helpful to utilize an interpreter. Working with interpreters over telehealth requires planning, coordination, and clear communication to ensure sessions run smoothly. It is important to use a trained medical or mental health interpreter who is familiar with virtual platforms. Have the interpreter arrive early and begin each session by reviewing confidentiality, communication flow, and camera placement so all parties remain visible and engaged. The therapist should speak directly to the client or caregiver, not the interpreter, to preserve rapport and therapeutic connection. Interpreters should also have access to the same secure platform and privacy standards as the clinician. Additionally, when working with trauma, it is important to check in with the interpreter after the session and provide them with Low Impact Debriefing and skills and resources to help them cope with the trauma related information they may have heard during the session. With thoughtful preparation, using interpreters virtually can expand access to trauma treatment for families who might otherwise face language barriers.

"Healing doesn't wait for perfect circumstances—telehealth makes care possible today."

Although these situations are undeniably more challenging over telehealth, they are not insurmountable. With thoughtful planning, caregiver partnership, and flexible strategies, clinicians can adapt their approach to provide meaningful care that otherwise might not be accessible.

Telehealth has moved far beyond a temporary solution, it is now a cornerstone of accessible mental health care. As this toolkit has shown, virtual care comes with challenges, but with creativity, preparation, and caregiver partnership, it can be just as effective as in-person services. For many families, particularly those in rural and medically underserved communities, telehealth is not just a convenience, it is the only pathway to treatment.

The success of telehealth rests on a few essential principles:

1. Strong engagement of families and caregivers
2. Thoughtful policies and emergency protocols
3. Intentional training and well-being support for clinicians
4. A clear workflow that ensures consistency

Above all, it requires a mindset that sees barriers not as roadblocks, but as opportunities for innovation.

Our collective responsibility is to meet families where they are, quite literally, and offer care that is safe, evidence-based, and trauma-informed. By leaning into flexibility, building strong therapeutic relationships, and sharing tools across teams and agencies, we can ensure that no child is left without access to healing.

Appendices

Staff Telehealth Readiness

Training Checklist

All Staff

- [ ] I can explain what telehealth is and how we use it.
- [ ] I know the benefits and limitations of telehealth.
- [ ] I know who to contact with client questions or technical issues.
- [ ] I understand our confidentiality and privacy expectations.

Clinicians

- [ ] I can use all features of our telehealth platform.
- [ ] I have adapted in-person activities for telehealth.
- [ ] I am comfortable managing emergencies in a telehealth.
- [ ] I know how to verify a client's location and emergency contact each session.
- [ ] I understand the forms and policies needed for telehealth.
- [ ] I know how to document a telehealth session.
- [ ] I know how to engage clients over telehealth.
- [ ] I know how to make the services I provide over telehealth equitable.

Support Staff

- [ ] I can explain telehealth appointment procedures to clients.
- [ ] I can guide a client through basic connection steps.
- [ ] I can troubleshoot common tech problems or escalate them.
- [ ] I can do a barriers screen and screen for telehealth services.

Leadership

- [ ] I have ensured time and resources for telehealth training and support.
- [ ] I can describe how telehealth supports our mission and equity goals.
- [ ] I have a plan for monitoring performance and making improvements.

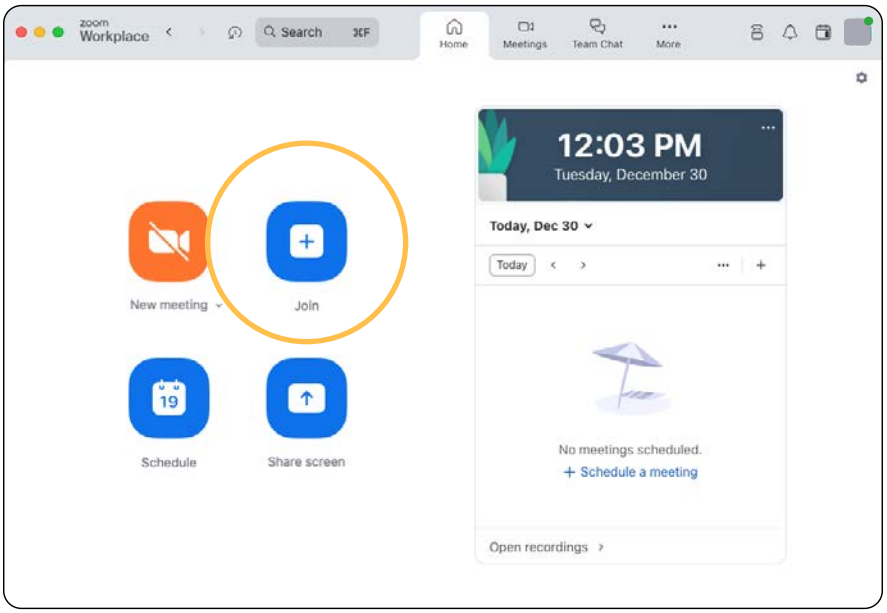
Zoom Tip Sheet

STEP 1

Download and launch the **Zoom** application.

STEP 2

Click **Join** from the home screen.



STEP 3

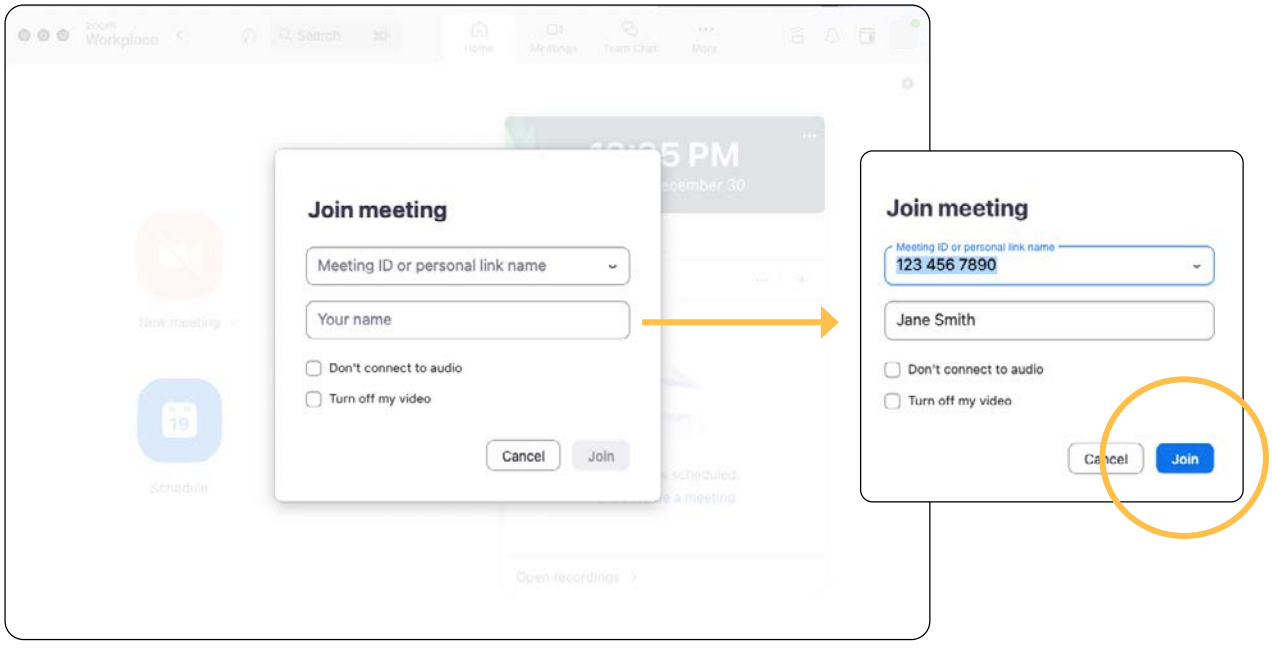
Enter the **Meeting ID** provided by the clinician.

STEP 4

Enter the child's name into the second box.

STEP 5

Click **Join** to enter the meeting room.



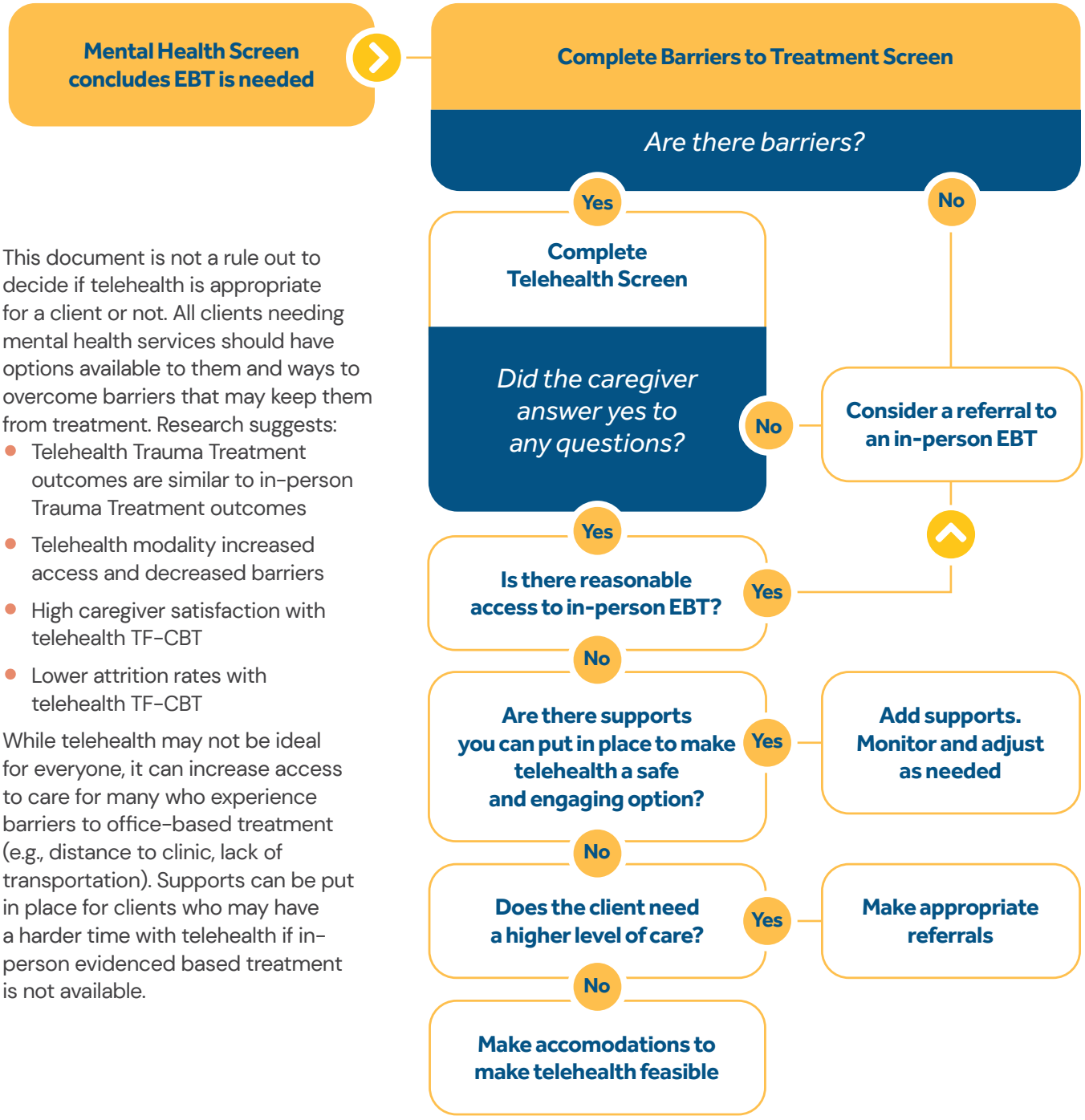
MUSC Medical University of South Carolina

Telehealth Outreach PROGRAM

TelehealthForTrauma.com

Telehealth Guidance Document

Considerations when referring for in-person or to telehealth



This document is not a rule out to decide if telehealth is appropriate for a client or not. All clients needing mental health services should have options available to them and ways to overcome barriers that may keep them from treatment. Research suggests:

- Telehealth Trauma Treatment outcomes are similar to in-person Trauma Treatment outcomes
- Telehealth modality increased access and decreased barriers
- High caregiver satisfaction with telehealth TF-CBT
- Lower attrition rates with telehealth TF-CBT

While telehealth may not be ideal for everyone, it can increase access to care for many who experience barriers to office-based treatment (e.g., distance to clinic, lack of transportation). Supports can be put in place for clients who may have a harder time with telehealth if in-person evidenced based treatment is not available.

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Telehealth Outreach PROGRAM

TelehealthForTrauma.com

Overcoming Challenges in Telehealth

Supports to Make Telehealth Safe and Engaging

1. Preschool/Young Child

- Consider shorter sessions.
- Incorporate caregivers into the session to assist with focus, doing activities, and redirection.
- Incorporate music, movement, and interactive games into sessions.
- Take movement breaks.
- Hold sessions in a room with limited distractions.

2. Hearing/Vision Impaired

- See what supports and accommodations they already use.
- Connect with the school to see what accommodations are available.
- Use a live interpreter and or app,
- Use the chat function, if appropriate for hearing impaired.
- Incorporate tactile resources sent to client's home such as a tactile book, stress ball, etc.

3. Hyperactive/ADHD

- Consider shorter sessions. Incorporate movement and interactive games into sessions. Take movement breaks.
- Hold sessions in a room/space that has limited distractions.
- Provide fidgets and/or seats that use balance and movement.
- If the child takes medication for ADHD, explore when the medication is most active.
- Incorporate a caregiver into the session to assist with redirection.

4. Aggression

- Ensure devices are protected adequately with strong screen protectors and cases like the Otterbox Defender case.
- Help the family identify a therapy space in the home where there are minimal breakable items.
- Set up a behavior plan with the child and family prior to sessions that focus on rewarding positive and wanted behaviors.

Overcoming Challenges in Telehealth

Supports to Make Telehealth Safe and Engaging

5. Lack of Confidential Space

- Assist family with identifying a private space for therapy.
- Do a tour via tele with the caregiver and child. Provide the child with headphones and noise machine to increase confidentiality.
- Use cues and signals to communicate when its safe to talk.
- Utilize chat box function in the platform.
- Work with the caregiver to keep other children busy and well supervised.
- Explore whether there is a private space that could be utilized at the school or partner agency.

6. Problematic Sexual Behaviors

- Lock down telehealth equipment and monitor usage appropriately. (i.e. Parental control software, Apple Mobile Device Management).
- Establish ground rules often about using the device appropriately during session, such as keeping camera on, staying in the camera view, and not looking at other sites during sessions.
- Have the child sit further back from the camera so you can see their whole body.

7. Caregiver Unavailable

- Utilize a neighbor, other relative or adult friend to be home with the child. Consider school-based telehealth for the child's portion.
- Identify a time to connect with the caregiver to complete the caregiver component of each session and update them on the child's progress and homework even if using school based telehealth.

8. Self Harm

- Consider whether home, school or a partner agency is best to provide additional safety measures.
- Work with caregiver, school, or partner agency to ensure a safe space for therapy (i.e. no sharps).
- As always, every session ensure the emergency protocol can be followed. Specifically, that you have the phone number of the adult in charge.
- Ensure specific expectations of not bringing sharps into session and being able to see the child at all times are discussed.

Telehealthfortrauma.com

Reducing Barriers and Expanding Access

MUSC's Telehealth Outreach Program is a specialized resource hub focused on advancing telehealth delivery for trauma-informed child and adolescent care.

The site offers a blend of training, research and outcome reports, clinical resources, and telehealth best practices geared toward practitioners working with youth traumatic stress. It also provides details on upcoming webinars and tools for staff and agencies to build capacity. The site not only offers telehealth therapy tools, but also embodies a model of how training infrastructure can be scaled and sustained. In short, it's an excellent go-to platform for clinicians and administrators seeking up-to-date, trauma-focused telehealth guidance, professional development, and resources. TelehealthForTrauma.com was developed through grants from HRSA and SAMHSA.

1. Start with Training and Webinars
Visit the Education & Training section to access upcoming training designed for clinicians, supervisors, and agency leaders. These sessions cover everything from foundational telehealth setup to advanced trauma treatment adaptations and family engagement strategies. Users can also request training from our expert team. Check out our "Where We've Trained" map to see if training has happened near you. The site's training calendar is regularly updated with training and webinars.

2. Explore Clinical Resources
The Resources tab provides practical tools, techniques, and handouts for delivering trauma-informed care via telehealth. These downloadable materials are ready to use in both English and Spanish and can help therapists tailor evidence-based interventions as well as troubleshoot common challenges such as engagement, privacy, and crisis response.

3. Learn from Research and Case Studies
Still curious about if telehealth works? Check the Research & Outcomes section for data on the effectiveness of telehealth in child trauma treatment. These findings can be useful for grant writing, program justification, or staff education efforts.

4. Connect and Collaborate
Clinicians and agencies can use the Contact page to connect with the MUSC Telehealth Outreach team for consultation or training support. This connection helps programs stay aligned with national best practices and build sustainable telehealth models.

Making a Difference. No Matter the Distance.

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